

Image# 10931248557



American
Future Fund
Advocating Conservative,
Free Market Ideals

To: *FEC*

From: *Sandy Greiner*

Fax: *202-219-0174*

Pages: *4*

Phone:

Date: *9-10-2010*

Re: *FEC FORM 5*
AR-01

cc:

☐ Urgent

☐ For Review

☐ Please Comment

☐ Please Reply

Comments:

Please note: FORM 5 is being filed via fax because the electronic filing system was inaccessible.

4225 FLEUR DRIVE, #142 • DES MOINES, IOWA 50321

AMERICAN FUTURE FUND, INC.

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation American Future Fund		3. FEC Identification Number 030001028
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 4225 Fleur Drive #142		
(c) City, State and ZIP Code Des Moines IA 50321		
2. Corporate filers only Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report☐ July 15 Quarterly Report☐ October 15 Quarterly Report☐ January 31 Year-End Report☐ 24-Hour Report☒ 48-Hour Reportb) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

09 01 2010

THROUGH

10 07 2010

6. TOTAL CONTRIBUTIONS

000

7. TOTAL INDEPENDENT EXPENDITURES

184 581 96

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Sandy Greiner**Sandy Greiner****9-10-2010**

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530. Local 202-694-1100

SP001

FEC Schedule 5 (REV. 09/2005)

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

PAGE 2 OF 3

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)

American Future Fund

A. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

B. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

C. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

D. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page carry total to Line 6)

0.00

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE **3** OF **3**
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Future Fund

Full Name (Last, First, Middle Initial) of Payee

Mentzer Media Services Inc

Date

09 01 2010

Mailing Address

1600 Fairmount Ave Ste 304

Amount

170204.00

City

Towson

State

MD

Zip Code

21284

Purpose of Expenditure

TV Ad Placement "Trick Causey"

Category/
Type

4

Office Sought:

☒ House

State: AR

☐ Senate

District: 01

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Chad Causey

Calendar Year-To-Date Per Election
for Office Sought

170204.00

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

McCarthy Marcus Hennings Ltd

Date

09 10 2010

Mailing Address

1850 "M" St NW Ste 235

Amount

14,377.96

City

Washington

State

DC

Zip Code

20036

Purpose of Expenditure

TV Ad Production "Trick Causey"

Category/
Type

4

Office Sought:

☒ House

State: AR

☐ Senate

District: 01

☐ President

Check One:

☐ Support☒ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Chad Causey

Calendar Year-To-Date Per Election
for Office Sought

184581.96

Disbursement For:

☐ Primary☒ General☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Date

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary☐ General☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures

184,581.96

(b) SUBTOTAL of Unitemized Independent Expenditures

0.00

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

184,581.96

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

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N/A
PREPARER

N/A
DATE PREPARED

(5/2004)